## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000073771 (6)

CHARLES PALMISANO BROKEBAGE, INC.

310.312		, 101, 110			
Principal Plai	ce of Business	Mailing Address	VANERALIS AND		1680 4011   BB#F   BBB   1101   1681
801 LAUREL	OAK DR.	801 LAUREL OAK DR.			
SUITE 640		SUITE 640		DO NOT MOTE IN TU	O C-12 A 221"
NAPLES FL	33963	NAPLES FL 33963		3. Date Incorporated or Qualified	S SPACE
				· 1	
2. Principal I	Place of Business	2a. Mailing Address		10/18/1993 4. FEI Number	Applied For
21		26		65-0446633	Not Applicable
Suite, Apt.	. #, etc	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Sta	te	City & State		6. Election Campaign Financing	\$5.00 May Be
23	2000 1 20 1 20 1 20 1 20 1 20 1 20 1 20	28		Trust Fund Contribution	Added to Fees
Zip	Country	/ ip	Country	8. This corporation owes or has paid the o	
24	25 9. Name and Address of Cur	29	30	Personal Property Tax due June 30.	Yes No
OIF		rein negistereu Agent	81 Name	10. Name and Address of New Registere	a Agent
	RES, ANTHONY P JR				
	1 Laurel oak dr. Jite 640		82 Street Addi	ress (P.O. Box Number is Not Acceptable)	
	лте 640 APLES FL 33963		83		
IN/	AFLES FL 33863		- III ve Arias kera		
			84 City		85 Zip Code
agent. La	to the provisions of Sections 607.0 registered agent, or both, in the Starn familiar with, and accept the ob	0502 and 607, 1508, Florida Stat ate of Florida, Such change was digations of, Section 607, 0505, i	utes, the above-named corp authorized by the corporat forida Statutes.	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	
SIGNATURE	Standing band or nanted game of registered	arent and bile if applicable	UF Horistored agent signature require	and when remediated	
SIGNATURE	Signature, hyped or printed name of registered OFFICERS A	Name	TE Registered Agent signature requir	- Approximation	ND DIRECTORS IN 12
		egent and lute if applicable (No AND DIRECTORS	TE Registered Agent signature require 13.	red when reinstaling) TAIL ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12 Change Addition
12.	OFFICERS A	AND DIRECTORS	13.	- Approximation	
12.	OFFICERS A	AND DIRECTORS	13. 1.1 T/LE	- Approximation	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN THE PERSON NAMED IN THE PERSON NAMED IN THE PERSON
12. TITLE NAME	OFFICERS A D PALMISANO, CHARLES	AND DIRECTORS  DELEIL	13. 1.1 TITLE 1.2 NAME	- Approximation	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN THE PERSON NAMED IN THE PERSON NAMED IN THE PERSON
12. TITLE NAME STREET ADDRESS	D PALMISANO, CHARLES P.O. BOX 1478 N/A	AND DIRECTORS  DELEIL	13. 1.1 TITLE 1.2 NAME 1.3 SIREH AUDRESS	- Approximation	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN THE PERSON NAMED IN THE PERSON NAMED IN THE PERSON
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PALMISANO, CHARLES P.O. BOX 1478 N/A	AND DIRECTORS  DELEIL	13. 1.1 TITLE 1.2 NAME 1.3 STREET AUDRESS 1.4 CITY - ST-ZIP	- Approximation	Change Addition
12.  DILE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	D PALMISANO, CHARLES P.O. BOX 1478 N/A	AND DIRECTORS  DELEIL	13. 1.1 TITLE 1.2 NAME 1.3 SIRE: ( AUDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	- Approximation	Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PALMISANO, CHARLES P.O. BOX 1478 N/A	PAND DIRECTORS  DELEIL  DELEIL  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 SIREL ( AUDRESS  1.4 CITY - ST - ZIP  2.1 TITLE  2.2 NAME  2.3 SIRELT ADDRESS  2.4 CITY - ST - ZIP	- Approximation	Change Addition Change Addition
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14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes: and that my name appears in Block 12 or Block 13 it changed, or on an attachment with an address.

Chapter 9 Almis and SIGNATURE:

**FILED** 

Jan 16 1998 8:00am

Secretary of State